

Work Experience Program (WEP) Fall - Winter - Spring - Summer

(Please circle the session you are applying for)

City of San José, Department of Parks, Recreation and Neighborhood Services, Administrative Services

APPLICATION

Please Return Application to: PRNS, Work Experience Program Shirakawa Community Center

2072 Lucretia Avenue, San José, CA 95122

Please print clearly and attach extra sheets if
necessary.

Please use your legal name on all documents.

CONTACT I	NFORMATION:							
Last Name:		First Name:		Middle Initial:		☐ Male ☐ Female		
Street Address:		City:		Zip Code:		Date of Birth	Age:	
Phone:	Cell Phone:		Email Address:		Social Security #:			
Emergency contact information:		Name:		Relationship:		Phone:		
AVAILABIL								
	ously participated in the W	ork Experien	ce Program? YE					
	you be available to work?		1 1			on do you have?	I	l
What hours are	you available to work?	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
	Starting Time:							
	Ending Time:							
EDUCATION	N:							
Jr. High, High School, Continuation or Trade Schools			Currently Enrolled?	# Of years completed	Dates attended	Year you will graduate	Awards & Certificates	
Name:			YES □ NO □					
City:								
EMPLOYMI	ENT HISTORY: Begi and	nning with y volunteer po		f most recent	job, please lis	st ALL work ex	xperience, in	cluding paid
From (Date)	Employer			Job Title		☐ Paid – Pay Rate \$		
To (Date)	City	State		Supervisor	pervisor's Name		Supervisor's Phone	
Total Months/ Years	Reason for leaving							
Hours/Week	Job Duties							
From (Date)	Employer			Job Title		☐ Paid – Pay Rate \$		
To (Date)	City	State		Supervisor's Name		Supervisor's Phone		
Total Months/ Years	Reason for leaving							
Hours/Week	Job Duties							

SKILL SUMMARY:								
English speaking skills:	English reading skills:	English writing skills:						
☐ Conversational ☐ Fluent	☐ Basic ☐ Intermediate ☐ Advanced	☐ Basic ☐ Intermediate ☐ Advanced						
Languages spoken other than English:								
□ Spanish □ Vietnamese □ Cantonese □ Mandarin □ Tagalog □ Cambodian □ American Sign Language □ Other: Computer skills: Software programs used:								
☐ Basic ☐ Intermediate ☐ Advanced								
Office equipment used: Fax machine C								
Experience working with children: YES								
Hand tools used (please list):								
INTERESTS AND EXTRACURRICU	JLAR ACTIVITIES:							
EMPLOYMENT DOCUMENTS NEE	EDED, <u>IF HIRED</u> :							
1. A U.S. Passport or Certificate of U.S. Citizens	hip/Naturalization:							
OR								
2. One form of Picture ID (CA ID card, Driver's	License, or Student ID) AND Proof of eligibility to work	(Original Social Security Card or Birth Certificate)						
IF VOILARE UNDER 18 VEARS OL	D RV LAW VOII WILL BE REQUIRED '	ГО OBTAIN A WORK PERMIT, IF HIRED:						
IF TOO ARE UNDER TO TEARS OF	D, DI LAW 100 WILL DE REQUIRED	TO OBTAIN A WORK LERWIT, IT HIRED.						
WORK PERMIT APPLICATION ➤ Please attach a Work Permit Application (which you can get through your guidance counselor or the career center located at your school). If you are chosen for the program, the WEP staff will sign the form and return it to you to be processed at your school (your school cannot issue a Work Permit until you are hired).								
PLEASE CHECK ALL THAT APPLY: (Optional) Ethnicity: A job applicant has the opportunity to voluntarily indicate his/her ethnic identification on an employment application. Each applicant also has the opportunity to voluntarily identify any disabilities. This portion of the application will be kept confidential, and may assist the employer and placing agencies to compile statistical reports regarding the composition of the participants in any related educational and/or employment programs. It is unlawful to use this information to discriminate against or give preference to a person for hiring or promotion.								
	ic Islander Black-Not Hispanic	☐ Samoan ☐ Alaska Native						
☐ Hispanic/Latino ☐ Asian	n □ Cambodian	☐ Japanese ☐ Southeast Asian						
☐ Korean ☐ Laoti	ian Chinese	☐ Filipino ☐ Other						
		r						
CONFIDENTIAL INFORMATION:								
Have you ever been fired from a position?	YES □ NO If yes, please explain:							
CERTIFICATION – (Read carefully be	efore signing)							
I hereby certify that all statements made	in this application are true and I agree and und	derstand that any misstatement of material facts						
may cause forfeiture of my eligibility for employment. I also understand that falsification or omission of information regarding								
convictions will result in my removal from eligible lists or dismissal from employment.								
I give permission to release this information to the job placing agency and the City of San José to support my employment services.								
Signature of Applicant Date	Signature of Parent	Phone Date						
Signature of School Guidance Counselor	Date Phone N	umber						